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Fill in this information to identify you	ır case:	
United States Bankruptcy Court for	the:	
Eastern District of Peni	nsylvania	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if the amended

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name	Alice			
	Write the name that is on your	First name	First name		
	government-issued picture identification (for example, your	Kim Middle name			
	driver's license or passport).	Cassel	Middle name		
	Bring your picture identification to your meeting with the trustee.	Last name	Last name		
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)		
_	All other names you have				
2.	used in the last 8 years	First name	First name		
	Include your married or maiden names and any assumed, trade names and <i>doing business as</i>	Middle name	Middle name		
	names.	Last name	Last name		
	Do NOT list the name of any separate legal entity such as a				
	corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)		
		Business name (if applicable)	Business name (if applicable)		
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>9</u> <u>4</u> <u>4</u> <u>8</u>	xxx - xx		
	federal Individual Taxpayer	OR	OR		
	Identification number (ITIN)	9xx - xx	9xx - xx		

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Debtor 1		Alice	Kim	Cassel		Case number (if known)			
		First Name	Middle Name	Last Name					
			About Debtor	1:		About Debtor 2	(Spouse Only in a Joi	nt Case):	
4.	Your Employer Identificati Number (EIN), if any.								
Number (EIN)		a, nany.	EIN			EIN			
			EIN -	. — — — — —		EIN		-	
5.	Where you	live				If Debtor 2 lives	s at a different address	:	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		882 Weikel F	R4					
				treet		Number St	reet		
			l ansdala P	A 19446-4548					
			City		Code	City	State	ZIP Code	
			Montgomery	ı					
			County			County			
				address is different from the cote that the court will send any ing address.			ailing address is differe that the court will send ddress.		
			Number S	itreet		Number St	reet		
			P.O. Box			P.O. Box			
			1.0. 50%			1.0. Box			
			City	State ZIP	Code	City	State	ZIP Code	
6.	Why you ar	e choosing <i>thi</i> s	Check one:			Check one:			
		le for bankruptcy	_						
			Over the la have lived district.	st 180 days before filing this pe in this district longer than in any	etition, I y other	Over the last have lived in district.	st 180 days before filing n this district longer tha	g this petition, I n in any other	
				ther reason. Explain. S.C. § 1408)		I have anoth	her reason. Explain. S.C. § 1408)		
							,		
					<u></u>				

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Debt	tor 1	Alice	Kim	Cassel	Case r	number (if known)			
		First Name	Middle Na	me Last Name					
Par	t 2: Tell the	e Court About You	ır Bankr	ruptcy Case					
7.		of the Bankruptcy e choosing to file	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13						
8.	How you wil	ll pay the fee	deta chec a cre to P I rec judg offic choc	ils about how you may pay. ck, or money order. If your a edit card or check with a pre ed to pay the fee in installm ay The Filing Fee in Installn quest that my fee be waived e may, but is not required to ial poverty line that applies	nents. If you choose this option, sign and nents (Official Form 103A). If (You may request this option only if you waive your fee, and may do so only if to your family size and you are unable to out the Application to Have the Chapter	self, you may pay with cash, cashier's our behalf, your attorney may pay with d attach the <i>Application for Individuals</i> u are filing for Chapter 7. By law, a your income is less than 150% of the pay the fee in installments). If you			
9.	Have you fil within the la	ed for bankruptcy st 8 years?	☑ No. □Yes.	District District District	When MM / DD / YYY	Case number Y Case number			
10.	pending or k spouse who case with yo	kruptcy cases being filed by a is not filing this bu, or by a rtner, or by an	☑ No. □ Yes.	District	When When When When When When MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known			
11.	Do you rent	your residence?	_	✓ No. Go to line 12.	d an eviction judgment against you? Itement About an Eviction Judgment Aga ptcy petition.	ainst You (Form 101A) and file it			

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Debtor 1 Alice First Name		Kim	Cassel		Case number (if known)				
		First Name	Middle Na	ame Last Name	. ,				
Par	t 3: Repor	t About Any Busin	iesses Y	ou Own as a Sole Propriet	or				
12.	Are you a	sole proprietor of	☑ No.	Go to Part 4.					
	any full- or business?	part-time	☐ Yes.	. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a			e of business, if any					
		, partnership, or LLC.	Num	ber Street					
	proprietorsh sheet and a	more than one sole nip, use a separate ttach it to this	_						
	petition.		City		State	ZIP Code			
			Che	ck the appropriate box to descri	be your business:				
				Health Care Business (as define	ed in 11 U.S.C. § 101(27A	.))			
				Single Asset Real Estate (as de	fined in 11 U.S.C. § 101(5	51B))			
				☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))					
				None of the above					
13.	11 of the B	ing under Chapter ankruptcy Code, u a s <i>mall busin</i> ess	appropri sheet, st	iate deadlines. If you indicate that	at you are a small busines w statement, and federal i	ou are a small business debtor so that it can set s debtor, you must attach your most recent balance ncome tax return or if any of these documents do not			
	For a definit	tion of small business	☑ No.	I am not filing under Chapte	er 11.				
	debtor, see 101(51D).	11 U.S.C. §	☐ No.	I am filing under Chapter 11 Bankruptcy Code.	, but I am NOT a small bu	usiness debtor according to the definition in the			
			☐ Yes.			ebtor according to the definition in the der Subchapter V of Chapter 11.			
			☐ Yes.	I am filing under Chapter 11		ebtor according to the definition in the			

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Debt	or 1	Alice		Kim Cassel		Case number (if known)	
		First Name	Middle Nam	e Last Name		<u> </u>	
Pari	t 4: Repor	t if You Own or Ha	ave Any H	azardous Property or	Any Prope	perty That Needs Immediate Attention	
14.	Do you ow	n or have any	☑ No.				
		at poses or is oose a threat of	☐ Yes.	What is the hazard?			
		nent and identifiable rd to public health or	t and identifiable				
	safety? Or do you own any property that needs immediate						
	attention?			If immediate attention is	needed, why	y is it needed?	
	For example, do you own perishable goods, or livestock						
		hat must be fed, or a building hat needs urgent repairs?					
				Where is the property?		_	
					Number	Street	
					City	State ZIP Code	

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Debtor 1	Alice	Kim	Cassel	Case number (if known)	
	First Name	Middle Name	Last Name	(

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1	Alice	Kim	Cassel	Case number (if known)				
First Name M		Middle N	ame Last Name					
Part 6:	Answer These Question	ns for Re	eporting Purposes					
16. What kind of debts do you have?								
			Are your debts primarily busin for a business or investment or No. Go to line 16c. Yes. Go to line 17.		e debts that you incurred to obtain money usiness or investment.			
		16c.	State the type of debts you owe	that are not consumer debts o	r business debts.			
Do ex an pa for	e you filing under Chapter 7 you estimate that after any empt property is excluded d administrative expenses a id that funds will be available distribution to unsecured editors?	√ 1		7. Do you estimate that after ar	ny exempt property is excluded and able to distribute to unsecured creditors?			
	ow many creditors do you timate that you owe?		1-49		50,000-100,000			
	ow much do you estimate yo sets to be worth?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
	ow much do you estimate yo bilities to be? Sign Below		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
For yo	If I have States If no at have ol I reque I under bankru and 35	e chosen t Code. I un torney rep btained an st relief in stand mak ptcy case 71.	to file under Chapter 7, I am awanderstand the relief available underseents me and I did not pay or and read the notice required by 11 accordance with the chapter of this gray a false statement, concealing	the that I may proceed, if eligible ler each chapter, and I choose agree to pay someone who is r U.S.C. § 342(b). title 11, United States Code, sp g property, or obtaining money	not an attorney to help me fill out this documer	nt, I		

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Debtor 1	Alice	Kim	Cassel	Case number (if known)
	First Name	Middle Name	Last Name	<u> </u>
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file to page.		proceed under each chapter for 11 U.S.C. § 34	Chapter 7, 11, 12, or 13 of or which the person is eligible 2(b) and, in a case in which	this petition, declare that I have informed the debtor(s) about eligibility to f title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by h § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /s/ Mich	ael A. Cibik	Date 08/30/2024
		Signature	of Attorney for Debtor	MM / DD / YYYY
		Michael	A. Cibik	
		Printed na	me	
		Cibik La	w, P.C.	
		Firm name	•	
		1500 Wa	Inut Street Suite 900	
		Number	Street	
		Philadel	phia	PA 19102
		City		State ZIP Code
		Contact ph	none (215) 735-1060	Email address help@cibiklaw.com
		23110		PA
		Bar numbe	er	State

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Fill in the	his inform	ation to identify y	our case an	nd this filing:				
Debtor	· 1	Alice	Kim		Cassel			
		First Name	Middle	Name	Last Name		_	
Debtor	2							
(Spouse	e, if filing)	First Name	Middle	Name	Last Name			
United	States Bar	nkruptcy Court for	he:	Eastern	District of	Pennsylvania		
Case r	number							Check if this is an
								amended filing
∩ffici	al Forr	m 106A/B						
			anartı					
Sch	eauie	e A/B: Pr	operty	У				12/15
					-		ts in more than one cat	
							married people are filir eparate sheet to this fo	
	-		_		-	er every question.		,
Part	1: D	escribe Each	Residence	e, Buildina	g, Land, or Oth	ner Real Estate Y	ou Own or Have an I	nterest In
1.						ouilding, land, or simil		
	-	to Part 2.	gai oi equita	Die interest i	ir arry residence, s	ranang, lana, or sinni	ar property.	
	_	here is the proper	ty?					
	_		,					
2.						n Part 1, including any		\$0.00
	you nave	attached for 1 art	i. write that	number nere			-	
Part	2: D	escribe Your	Vehicles					
-		. •	•	•	•		r not? Include any vehicles s and Unexpired Leases.	
you owi	i tilat some	one else unves. II	you lease a v	remote, also re	sport it on oonedare	O. Executory Contract	s and onexpired Leases.	
3. C	ars, vans,	trucks, tractors,	sport utility v	ehicles, mot	orcycles			
	No							
¥	Yes							
3.	.1 Make:		Hyundai	Who has a	n interest in the pi	operty? Check one.	Do not deduct secured cla	ime or exemptions. But
	iviake.			Debtor	1 only		the amount of any secured	I claims on Schedule D:
	Model	:	Kona	☐ Debtor	2 only 1 and Debtor 2 only	,	Creditors Who Have Claim	is Secured by Property.
	Year:		2024	_	one of the debtors	and another	Current value of the entire property?	Current value of the portion you own?
	Appro	ximate mileage:	14,000	Check i	if this is communi		\$0.00	\$0.00
	• •	information:		instructi	ons)			
		tor leases vehic	nlo					
	Deb	tor leases verili)IG					
	_		_					
						, other vehicles, and a mobiles, motorcycle acc		
	<i>xampies.</i>	oais, iraileis, iil0ll	no, personal l	waterorait, iiSi	mig vessels, silowi	nobiles, motorcycle acc	0000UID0	
	Yes							

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Debtor Cassel, Alice Kim

Case number (if known)

5.	Add the dollar value of t you have attached for P	\$0.00	
Pa	rt 3: Describe You	ur Personal and Household Items	
Do yo	ou own or have any legal o	r equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and fur Examples: Major appliance	nishings es, furniture, linens, china, kitchenware	
	☐ No		
	✓ Yes. Describe	Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.	\$350.00
7.	Electronics		
		radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music etronic devices including cell phones, cameras, media players, games	
	☐ No		
	✓ Yes. Describe	Various used televisions, mobile devices, and computers, each valued at \$600 or less.	\$300.00
8.	Collectibles of value		
		gurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or ollections; other collections, memorabilia, collectibles	
	₫ No		
	Yes. Describe		
9.	Equipment for sports and	hobbies	
		aphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and try tools; musical instruments	
	√ No		
	Yes. Describe		
10.	Firearms Examples: Pistols, rifles, sl	notguns, ammunition, and related equipment	
	☑ No		
	Yes. Describe		
11.	Clothes Examples: Everyday clothe	es, furs, leather coats, designer wear, shoes, accessories	
	☐ No		
	Yes. Describe	Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$150.00

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Debtor Cassel, Alice Kim Case number (if known)

12.	Jewelry							
	Examples: Everyday jeweli silver	ry, costume jewelry, engag	ement rings, wedding rings, heirloom jewelry, watches, gems, gold,					
	☐ No							
	✓ Yes. Describe	Various used pieces	of iewelry.	\$100.00				
		- anoue dead proces	. ,					
13.	Non-farm animals							
	Examples: Dogs, cats, bird	s, horses						
	₫ No							
	Yes. Describe							
14.	Any other personal and ho	ousehold items you did n	ot already list, including any health aids you did not list					
	₫ No							
	Yes. Give specific information							
	momation							
15.		-	3, including any entries for pages you have attached	\$900.00				
	for Part 3. Write that numb	ber nere						
Da	rt 4: Describe You	ır Financial Assets						
ро у	ou own or have any legal o	r equitable interest in any	y of the following?	Current value of the portion you own?				
				Do not deduct secured claims or exemptions.				
16.	Cash			, , , , , , , , , , , , , , , , , , ,				
	Examples: Money you have	e in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petition					
	☑ No							
	☐ Yes		Cash:					
17	Denocite of manay							
17.	Deposits of money Examples: Checking, savir	ngs, or other financial acco	unts; certificates of deposit; shares in credit unions, brokerage houses,					
	and other similar institutions. If you have multiple accounts with the same institution, list each.							
	☐ No							
	√ Yes		Institution name:					
			Bank of America					
	17.	.1. Checking account:	Account Number: 4200	unknown				
18.	Bonds, mutual funds, or p	ublicly traded stocks						
	· · · · · · · · · · · · · · · · · · ·	-	kerage firms, money market accounts					
	√ No							
	Yes							
19.	Non-publicly traded stock LLC, partnership, and join		rated and unincorporated businesses, including an interest in an					
	✓ No							
	Yes. Give specific							
	information about them							

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Debtor Cassel, Alice Kim

Case number (if known)

20.	Government and corpo	orate bonds and other	negotiable and non-negotiable instruments					
	Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.							
	☑ No							
	Yes. Give specific information about them							
21.	Retirement or pension	accounts						
	Examples: Interests in I	IRA, ERISA, Keogh, 401	1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans					
	☐ No							
	Yes. List each account separately.	Type of account:	Institution name:					
		401(k) or similar plan:	Ascension	\$200.00				
22.		deposits you have mad	de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications companies, or					
23.	Annuities (A contract for	r a periodic payment of	money to you, either for life or for a number of years)					
	√ No							
	☐ Yes							
24.	Interests in an education 26 U.S.C. §§ 530(b)(1),		in a qualified ABLE program, or under a qualified state tuition program.					
	√ No							
	☐ Yes							
25.	Trusts, equitable or fut for your benefit	ture interests in prope	rty (other than anything listed in line 1), and rights or powers exercisable					
	√ No							
	Yes. Give specific information about the	əm						
26.	Patents, copyrights, tra	ademarks, trade secre	ts, and other intellectual property					
	Examples: Internet dom	nain names, websites, p	proceeds from royalties and licensing agreements					
	√ No							
	Yes. Give specific information about the	əm						

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Debtor Cassel, Alice Kim Case number (if known)

27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	☑ No	
	Yes. Give specific information about them	
Mone	ey or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	☑ No	
	Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	
	☑ No	
	Yes. Give specific information	
30.	Other amounts someone owes you	
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	☑ No	
	☐ Yes. Give specific information	
31.	Interests in insurance policies	
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	☑ No	
	Yes. Name the insurance company of each policy and list its value	
32.	Any interest in property that is due you from someone who has died	
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.	
	☑ No	
	Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment	
	Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	☑ No	
	Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
	☑ No	
	☐ Yes Describe each claim	

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Debtor Cassel, Alice Kim Case number (if known)

35.	Any financial assets you did not already list	
	☑ No	
	Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$200.00
Pa	Describe Any Business-Related Property You Own or Have an Interest In. List any re	eal estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	☑ No. Go to Part 6.	
	Yes. Go to line 38.	
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$0.00
Pa	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an I If you own or have an interest in farmland, list it in Part 1.	nterest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	☑ No. Go to Part 7.	
	Yes. Go to line 47.	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Pa	Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list?	
	Examples: Season tickets, country club membership	
	☑ No	
	Yes. Give specific information	
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00
Pa	List the Totals of Each Part of this Form	
55.	Part 1: Total real estate, line 2	\$0.00
56.	Part 2: Total vehicles, line 5 \$0.00	
57.	Part 3: Total personal and household items, line 15 \$900.00	
58.	Part 4: Total financial assets, line 36 \$200.00	
59.	Part 5: Total business-related property, line 45 \$0.00	
60.	Part 6: Total farm- and fishing-related property, line 52 \$0.00	

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Debtor Cassel, Alice Kim Case number (if known)

61.	Part 7: Total other property not listed, line 54		\$0.00			
62.	Total personal property. Add lines 56 through 61	_	\$1,100.00	Copy personal property total	+_	\$1,100.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62.					\$1,100.00

Official Form 106A/B Schedule A/B: Property page 7

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Fill in this information to identify your case:								
Debtor 1	Alice	Kim	Cassel					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the: Eastern District of Pennsylvania								
Case number								
(if known)								

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Identify the Property You Claim as Exempt								
1.	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
		•	on of the property and ule A/B that lists this	Current value of the portion you own Copy the value from Schedule A/B		nount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption		
	Brief description Line from Schedule		2024 Hyundai Kona Debtor leases vehicle 3.1	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5)		
3.									

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Case number (if known)

Debtor 1

Alice Kim Cassel
First Name Middle Name Last Name

	on of the property and ule A/B that lists this	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
property		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Brief description:	Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.	\$350.00	Ø	\$350.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	6			100% of fair market value, up to any applicable statutory limit	3()(0)
Brief description:	Various used televisions, mobile devices, and computers, each valued at \$600 or	\$300.00			
	less.		$ \sqrt{} $	\$300.00	11 U.S.C. § 522(d)(3)
_ine from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief description:	Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$150.00	S	\$150.00	11 U.S.C. & E22/d\/2\
_ine from				100% of fair market value, up to	11 U.S.C. § 522(d)(3)
Schedule A/B:	11			any applicable statutory limit	
Brief description:	Various used	\$100.00			
accomption.	pieces of jewelry.		Ą	\$100.00	11 U.S.C. § 522(d)(4)
ine from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	
Brief description:	Bank of America Checking account	unknown			
	Acct. No.: 4200			unknown	11 U.S.C. § 522(d)(5)
ine from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	_
Brief description:	Ascension	\$200.00	⊴	\$200.00	
_ine from Schedule A/B:	21			100% of fair market value, up to any applicable statutory limit	

Fill in this inform	ation to identify your c	ase:		
Debtor 1	Alice	Kim	Cassel	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for th	e: Eastern	District of Pennsylvania	
Case number (if			
known)				Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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			ocument F	Page 19 of 46		
Fill in this info	ormation to identify you	ır case:				
Dobtor 1	Aliaa	I/:	Connel			
Debtor 1	Alice First Name	Kim Middle Name	Cassel Last Name	-		
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filir	ng) First Name	Middle Name	Last Name			
United State	s Bankruptcy Court fo	r the: Easter	n District	of Pennsylvania	<u> </u>	
Case number	er					
(if known)						☐ Check if this is an
						amended filing
Official Fo	rm 106E/F					
Sched	ule E/F: C	reditors Wh	no Have U	Jnsecured	d Claims	12/15
o as comple	to and accurate as n	assible Use Part 1 for a	raditors with BBIO	PITV claims and Bar	t 2 for araditors with NO	NPRIORITY claims. List the
orm 106A/B) laims that ar	and on Schedule Garage e listed in Schedule entries in the boxes of	Executory Contracts at D: Creditors Who Have	nd Unexpired Lease Claims Secured by	es (Official Form 106 <i>Property</i> . If more sp	G). Do not include any coace is needed, copy the	Schedule A/B: Property (Officia creditors with partially secured Part you need, fill it out, s, write your name and case
Part 1:	List All of Your F	PRIORITY Unsecured	l Claims			
	Go to Part 2.	ty unsecured claims aga	·			
	1 1					
_	•	riority unsecured claims				
☐ No. Y	You have nothing to re	port in this part. Submit the	his form to the court	with your other sched	ules.	
⊻ Yes						
nonpriori included	ity unsecured claim, lis	st the creditor separately none creditor holds a part	for each claim. For e	ach claim listed, ident		ditor has more than one Do not list claims already hree nonpriority unsecured
						Total claim
4.1 Assirm	. Ima		Loot 4 digito	of account number		¢222.00
A	<i>,</i>		Last 4 digits	of account number	<u>L 8 S U</u>	\$232.00
•	rity Creditor's Name		When was th	e debt incurred?	4/1/2024	
Attn: I	Bankruptcy					
30 Isa	bella St , Floor 4					
Number	Street			•	is: Check all that apply.	
Pittsh	urgh, PA 15212		Continger			
City	State	ZIP Co	— Unliquidat	ed		
•			☐ Disputed			
	curred the debt? Che	eck one.	Type of NON	PRIORITY unsecure	d claim:	
₫ Deb	tor 1 only		Student lo		u vidilli.	
Deb	tor 2 only				orotion carooment as diver	roo that you did not remort s-
Deb	tor 1 and Debtor 2 on	ly	U Obligation priority cla	•	aration agreement or divo	rce that you did not report as
☐ At le	east one of the debtors	and another	. ,		ng plans, and other similar	r debts
☐ Che	ck if this claim is for	a community debt		ecify Unsecured	5 ; 5 a.i.s. 5 a.i.s.	-
la 4h.c	laim aubiast to sff	10	_ :	,		-
is the c ☑ No	laim subject to offse	tr				

Yes

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Debtor 1

Alice Kim Cassel Case number (if known)

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims –	- Continuation Page							
ter listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim								
Attn: Bankruptcy 4909 Savarese Circle Number Street Tampa, FL 33634 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?		\$17,771.00 report as						
Yes 4.3 Chase Card Services Nonpriority Creditor's Name Po Box 15298 Number Street Wilmington, DE 19850-5298 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes	Last 4 digits of account number 6 4 4 0 When was the debt incurred? 3/1/2016 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not repriority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard	\$3,505.00 report as						

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_ Case number (if known) _

Debtor 1

Alice Kim Cassel
First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page							
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	rth.						Total claim
4.4	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	3		l <u> </u>				\$2,179.00
	Po Box 15298 Number Street Wilmington, DE 19850-5298	As of the date you file, the claim is Contingent	: Che	eck	all t	hat	apply.		
	City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	 Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separ priority claims Debts to pension or profit-sharing ✓ Other. Specify CreditCard 	ation	agı					ot report as
4.5	Comenity Bank/Ann Taylor Nonpriority Creditor's Name Attn: Bankruptcy PO Box 182125 Number Street Columbus, OH 43218	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated		12	2/1/2 all t	201	1		\$3,477.00
	City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	 □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify ChargeAccount 						ot report as	

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__ Case number (if known) ___

Debtor 1

Alice Kim Cassel
First Name Middle Name Last Name

	rt 2: Your NONPRIORITY Unsecured Claims -	- Continuation Page
After	r listing any entries on this page, number them beginnin	ng with 4.4, followed by 4.5, and so forth.
4.6	Hyundai Motor Finance	Last 4 digits of account number 1 6 9 5 \$11,596.00
	Nonpriority Creditor's Name	When was the debt incurred? 1/1/2024
	Attn: Bankruptcy	- 1/1/2024
	PO Box 20829	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Fountain Valley, CA 92728	☐ Contingent
	City State ZIP Code	UnliquidatedDisputed
	Who incurred the debt? Check one.	Type of NONDDIODITY upaccured claims
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	☐ Debtor 2 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	☑ Other. Specify Lease
	Is the claim subject to offset?	
	☑ No	
	Yes	
4.7	Kohl's	Last 4 digits of account number 6 5 2 6 \$2,956.00
	Nonpriority Creditor's Name	
	Attn: Credit Administrator	When was the debt incurred? 12/1/2011
		-
	PO Box 3043	-
	PO Box 3043 Number Street	As of the date you file, the claim is: Check all that apply.
		☐ Contingent
	Number Street	☐ Contingent ☐ Unliquidated
	Number Street Milwaukee, WI 53201-3043	☐ Contingent
	Number Street Milwaukee, WI 53201-3043 City State ZIP Code Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated
	Number Street Milwaukee, WI 53201-3043 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed
	Number Street Milwaukee, WI 53201-3043 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as
	Number Street Milwaukee, WI 53201-3043 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	Number Street Milwaukee, WI 53201-3043 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts
	Number Street Milwaukee, WI 53201-3043 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts
	Number Street Milwaukee, WI 53201-3043 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1

Alice Kim Cassel Case number (if known) First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims -	- Continuation Page				
After	listing any entries on this page, number them beginnin	ng with 4.4, followed by 4.5, and so forth.	otal claim			
4.8	Macy's/ DSNB	Last 4 digits of account number 9 5 2 2	\$2,923.00			
	Nonpriority Creditor's Name					
	Atytn: Bankruptcy 701 E. 60th Street North	When was the debt incurred? 1/1/2002				
	Number Street					
		As of the date you file, the claim is: Check all that apply.				
	Sioux Falls, SD 57104	☐ Contingent				
	City State ZIP Code	 ☐ Unliquidated ☐ Disputed 				
	Who incurred the debt? Check one.	- Disputed				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	☐ Debtor 2 only	☐ Student loans				
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not r priority claims 	eport as			
	At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Check if this claim is for a community debt	☑ Other. Specify ChargeAccount				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					
4.9	Synchrony Bank/QVC	Last 4 digits of account number 1 4 6 3	\$409.00			
	Nonpriority Creditor's Name	When we the debt in some 10				
	Attn: Bankruptcy	When was the debt incurred? 2/1/2016				
	PO Box 965060					
	Number Street	As of the date you file, the claim is: Check all that apply.				
	Orlando, FL 32896-5060	☐ Contingent ☐ Unliquidated				
	City State ZIP Code	☐ Disputed				
	Who incurred the debt? Check one.	T (NONDRIGHTY)				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	☐ Debtor 2 only	☐ Student loans	conort oo			
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not r priority claims 	eport as			
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Check if this claim is for a community debt	☑ Other. Specify ChargeAccount				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					

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Debtor 1

Alice Kim Cassel Case number (if known) _______

First Name Middle Name Last Name

listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
Synchrony Bank/TJX	Last 4 digits of account number 3 7 0 4 \$761.00
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 9/1/2020
PO Box 965060	
Number Street Orlando, FL 32896	As of the date you file, the claim is: Check all that apply. Contingent
City State ZIP Code	☐ Unliquidated ☐ Disputed
Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard

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Debtor 1

Alice Kim Cassel Case number (if known) _
First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. **Total claim Total claims** 6a. **Domestic support obligations** 6a. \$0.00 from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$0.00 Claims for death or personal injury while you were 6c. 6c. \$0.00 intoxicated Other. Add all other priority unsecured claims. 6d. 6d. \$0.00 Write that amount here. Total. Add lines 6a through 6d. 6e. \$0.00 **Total claim Total claims** 6f. Student loans 6f. \$0.00 from Part 2 6g. Obligations arising out of a separation agreement or 6g. \$0.00 divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other 6h. 6h. \$0.00 similar debts 6i. Other. Add all other nonpriority unsecured claims. 6i. \$45,809.00 Write that amount here.

6j.

\$45,809.00

6j.

Total. Add lines 6f through 6i.

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Fill in this information	n to identify your case	:		
Debtor 1	Alice	Kim	Cassel	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Easte	rn District of Pennsylv	ania
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	Hyundai Capital America Name Attn: Bankruptcy Po Box 20829 Number Street	2024 Hyundai Kona Contract to be ASSUMED
	Fountain Vly, CA 92728-0829	
	City State ZIP Code	
2.2	Melissa McNally Name 882 Weikel Road	Residential Contract to be ASSUMED
	Number Street	
	Lansdale, PA 19446	
	City State ZIP Code	
2.3		
	Name	
	Number Street	
	City State ZIP Code	
2.4		
	Name	
	Number Street	
	City State ZIP Code	

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				<u>Document Page</u>	27 of 46	
Fill in	this inform	nation to identify yo	ur case:			
Deb	tor 1	Alice	Kim	Cassel		
		First Name	Middle Name	Last Name		
	tor 2					
(Spo	use, if filing)	First Name	Middle Name	Last Name		
Unit	ed States E	Bankruptcy Court fo	or the: Easte	District of Po	ennsylvania_	
Cas	e number					
(if kn	own)			-		☐ Check if this is an amended filing
Offic	ial Forr	n 106H				
			ur Codebto	rc		
SCI	ledu	<u>те п. то</u>	ai Codebio	15		12/15
iling t he en	ogether, b	oth are equally re	esponsible for supplyir	ng correct information. If mo	ore space is needed, co	rate as possible. If two married people are py the Additional Page, fill it out, and number ages, write your name and case number (if
1.	Do you h	ave any codebtor	s? (If you are filing a join	nt case, do not list either spou	se as a codebtor.)	
	☑ No					
	☐ Yes					
2.	California	, Idaho, Louisiana,		unity property state or terri Puerto Rico, Texas, Washingto		erty states and territories include Arizona,
		o to line 3.		and and any time and the control of the angle	0	
	☐ Yes. L		rmer spouse, or legal ed	uivalent live with you at the ti	me?	
	_		unity state or territory did	vou live?	Fill in the n	name and current address of that person.
			,,			
	N	ame of your spous	e, former spouse, or leg	al equivalent		
	N	umber	Street			
	_					
	С	ity	State	ZIP Code		
3.	2 again a	s a codebtor only	if that person is a gua	rantor or cosigner. Make su	re you have listed the o	filing with you. List the person shown in line creditor on <i>Schedule D</i> (Official Form 106D), e <i>E/F</i> , or <i>Schedule G</i> to fill out Column 2.
	Column 1	: Your codebtor			Column 2: Th	e creditor to whom you owe the debt
					Check all sch	edules that apply:
3.1						
	Name				☐ Schedule	D, line
	Niverban		Otrost		Schedule	E/F, line
	Number		Street		☐ Schedule	G, line
	City		State	ZIF	P Code	
3.2						
	Name				☐ Schedule	D, line
					Schedule	E/F, line
	Number		Street		☐ Schedule	G, line

ZIP Code

State

City

		Case 24-1306)8/30/24 Iment F	Entered Page 28 o	08/30/24 1 of 46	4:39:08	Desc Mai	n	
Fill	I in this inform	ation to identify your c	ase:							
D	ebtor 1	Alice First Name		ssel Name		_				
(S U) Ci (if Of SC Be a information spool	ficial Fo	u are married and not ng with you, do not in	e: Eastern Dis	se is living wi Ir spouse. If m	ner (Debtor 1 a ith you, includ nore space is	de information al	A supplichapter MM / D oth are equally pout your spor	lement showing r 13 income as D / YYYY	of the follo	12/15 ng correct
	Fill in your			2.11						
	attach a sep information employers. Include part self-employe Occupation	more than one job, parate page with about additional time, seasonal, or	Employment status Occupation Employer's name Employer's address	Surgical C	d Not Emp Coordinator ery Surgery	Center		or 2 or non-filling		
			How long employed there?	Lansdale, City 5 years	PA 19446 State	e Zip Code	City	St	ate Zip	Code
Pa	art 2: Give	Details About Mor	thly Income							
	unless you a	are separated. Ir non-filing spouse ha	we more than one employer,		,	,	•	•	J	
	more space	, attach a separate she	eel to this form.			For Debtor 1	For Debtor			

Official Form 106I Schedule I: Your Income page 1

\$3,640.00

\$204.75

\$3,844.75

\$0.00

\$0.00

\$0.00

2. List monthly gross wages, salary, and commissions (before all payroll

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

deductions.) If not paid monthly, calculate what the monthly wage would be.

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Debtor 1 Alice Kim Cassel Case number (if known) ______

			For Debtor 1	For Debtor 2 or non-filing spouse	
5.	Copy line 4 here→ List all payroll deductions:	4.	\$3,844.75	\$0.00	
0.	5a. Tax, Medicare, and Social Security deductions	5a.	\$788.65	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$65.00	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insurance	5e.	\$89.40	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions. Specify:	5h.	+ \$0.00	+ \$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$943.04	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,901.71	\$0.00	
8.	List all other income regularly received:	,.			
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross				
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00	
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	ob.			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$1,229.40	\$0.00	
	8f. Other government assistance that you regularly receive				
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify:	8h.	+ \$0.00	+\$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$1,229.40	\$0.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$4,131.11	+ \$0.00	= \$4,131.11
11.	State all other regular contributions to the expenses that you list in Scheo	dule J.			
	Include contributions from an unmarried partner, members of your househol friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a			·	
	Specify:			_ 11. +	⊦ \$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics		-	come. Write that	\$4,131.11
					Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this form of No. ☐ Yes. Explain:	orm?			

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Fill in this informatio	n to identify your case			
Debtor 1	Alice	Kim	Cassel	Check if this is:
Debtor 2	First Name	Middle Name	Last Name	☐ An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name	A supplement showing postpetition chapt expenses as of the following date:
United States Bank	cruptcy Court for the:	Easte	ern District of Pennsyl	
Case number				MM / DD / YYYY
(if known)				

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household	d			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a sep	arata housahold?			
No	diate nousenoiu:			
Yes. Debtor 2 must file	Official Form 106J-2, Expenses for	Separate Household of Debtor 2.		
2. Do you have dependents?	☑ No			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	,			. No. Yes.
				. No. Yes.
				. No. Yes.
				. No. Yes.
				No. Yes.
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes			
Part 2: Estimate Your Ongoing N	Monthly Expenses			
Estimate your expenses as of your bar date after the bankruptcy is filed. If this				
Include expenses paid for with non-casuch assistance and have included it of			You	ır expenses
The rental or home ownership exp for the ground or lot.	enses for your residence. Include t	first mortgage payments and any rent	4	\$700.00
If not included in line 4:				
4a. Real estate taxes			4a	\$0.00
4b. Property, homeowner's, or rent	ter's insurance		4b	\$25.00
4c. Home maintenance, repair, and	d upkeep expenses		4c	\$0.00
4d. Homeowner's association or co	ondominium dues		4d	\$0.00

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Debtor 1 Alice Kim Cassel Case number (if known) ______

	First Name Middle Name Last Name		
			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
S.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$0.00
	6b. Water, sewer, garbage collection	6b.	\$0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$270.00
	6d. Other. Specify:	6d.	\$0.00
	Food and housekeeping supplies	7.	\$1,200.00
	Childcare and children's education costs	8.	\$0.00
	Clothing, laundry, and dry cleaning	9.	\$300.00
0.	Personal care products and services	10.	\$300.00
1.	Medical and dental expenses	11.	\$200.00
2.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$300.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$200.00
4.	Charitable contributions and religious donations	14.	\$0.00
5.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	15a.	\$0.00
	15b. Health insurance	15a. 15b.	\$26.00
	15c. Vehicle insurance	15b. 15c.	\$137.00
	15d. Other insurance. Specify:	15d.	\$0.00
3.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16.	\$0.00
7.	Installment or lease payments:		A466 55
	17a. Car payments for Vehicle 1	17a.	\$420.00
	17b. Car payments for Vehicle 2	17b.	\$0.00
	17c. Other. Specify:	17c.	\$0.00
	17d. Other. Specify:	17d.	\$0.00
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
9.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$0.00
0.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a.	\$0.00
	20b. Real estate taxes	20b.	\$0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
	20e. Homeowner's association or condominium dues	20e.	\$0.00

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Debtor 1 Alice Kim Cassel Case number (if known) -First Name Middle Name Last Name 21. Other. Specify: 21. +____ \$0.00 22. Calculate your monthly expenses. 22a. \$4,078.00 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. \$0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$4,078.00 23. Calculate your monthly net income. 23a. \$4,131.11 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 23b. Copy your monthly expenses from line 22c above. \$4,078.00 23c. Subtract your monthly expenses from your monthly income. \$53.11 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **✓** No. None Yes.

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Fill in this information	n to identify your case	:		
Debtor 1	Alice	Kim	Cassel	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	cruptcy Court for the:	Easte	ern District of Pennsylvania	
Case number (if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your origin new <i>Summary</i> and check the box at the top of this page.	al forms, you must fill out a
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$1,100.00
1c. Copy line 63, Total of all property on Schedule A/B	\$1,100.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	<u>\$0.00</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	Ψ0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$45,809.00
Your total liabilities	\$45,809.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	<u>\$4,131.11</u>
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$4,078.00

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Debtor 1 Alice Kim Cassel Case number (if known) _____

Last Name

First Name

Middle Name

Pa	rt 4: Answer These Questions for Administrative and Statistical Records						
	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the Younger of the form.	ne court with your other sched	ules.				
	 What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 						
	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	Official	\$3,568.25				
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim					
	From Part 4 on Schedule E/F, copy the following:						
	9a. Domestic support obligations (Copy line 6a.)	\$0.00					
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00					
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00					
	9d. Student loans. (Copy line 6f.)	\$0.00					
	9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00					
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00					
	9g. Total . Add lines 9a through 9f.	\$0.00					

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Fill in this information	to identify your case	:		
Debtor 1	Alice	Kim	Cassel	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankı	ruptcy Court for the:	Easte	rn District of Pennsylva	nia
Case number (if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorn	ey to help you fill out bankruptcy forms?
☑No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summ	nary and schedules filed with this declaration and that they are true and correct.
X /s/ Alice Kim Cassel	
Alice Kim Cassel, Debtor 1	
Data 09/20/2024	
Date <u>08/30/2024</u> MM/ DD/ YYYY	

Case 24-13061 Doc 1 Filed 08/30/24 Entered 08/30/24 14:39:08 Desc Main

Fill in this information to identify your case:
Debtor 1 Alice Kim Cassel
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Eastern District of Pennsylvania
Case number

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	tal Status and Where Y			
What is your current marital status?				
☐ Married				
☑ Not married				
2. During the last 3 years, have you lived ar	nywhere other than where y	ou live now?		
☑ No				
Yes. List all of the places you lived in the	ne last 3 years. Do not includ	de where you live now.		
3. Within the last 8 years, did you ever live territories include Arizona, California, Idaho,				
√ No				
Yes. Make sure you fill out <i>Schedule H</i>	: Your Codebtors (Official Fo	orm 106H).		
Part 2: Explain the Sources of Your	Income			
				
4. Did you have any income from employm Fill in the total amount of income you receive If you are filing a joint case and you have inc	ed from all jobs and all busin	esses, including part-time a	ctivities.	years?
Fill in the total amount of income you receive If you are filing a joint case and you have inc	ed from all jobs and all busin	esses, including part-time a	ctivities.	years?
Fill in the total amount of income you receive If you are filing a joint case and you have income No	ed from all jobs and all busin	esses, including part-time a	ctivities.	years?
Fill in the total amount of income you receive If you are filing a joint case and you have income No	ed from all jobs and all busing ome that you receive togeth	esses, including part-time a	ctivities. ebtor 1.	years? Gross Income
Fill in the total amount of income you receive If you are filing a joint case and you have income No	ed from all jobs and all busing ome that you receive togeth	esses, including part-time a er, list it only once under De	ctivities. ebtor 1. Debtor 2	
Fill in the total amount of income you receive If you are filing a joint case and you have income No	ed from all jobs and all busing ome that you receive togeth Debtor 1 Sources of income	esses, including part-time a er, list it only once under De Gross Income (before deductions and	Debtor 2 Sources of income	Gross Income (before deductions and exclusions)

	Case 24-13061	Doc 1 Filed 08/30 Documer			Desc Main
ebtor 1	Alice Kim	Cassel		Case number (if kn	own)
	First Name Middle	Name Last Name			
	alendar year: 1 to December 31, 2023	Wages, commissions, bonuses, tips	\$41,265.00	☐ Wages, commissions bonuses, tips	5,
(January	YYYY	Operating a business		Operating a business	
				_	
	alendar year before that: 1 to December 31, 2022)	✓ Wages, commissions, bonuses, tips	\$36,874.00		5,
	YYYY	Operating a business		Operating a business	
Include inco public benef filing a joint	eceive any other income during the regardless of whether that fit payments; pensions; rental incase and you have income that fill in the details.	income is taxable. Examples ncome; interest; dividends; m	of other income are alimony oney collected from lawsuits		curity, unemployment, and other and lottery winnings. If you are
		Debtor 1		Debtor 2	
		Sources of income	Gross income from	Sources of income	Gross Income from
		Describe below.	each source	Describe below.	each source
			(before deductions and exclusions)		(before deductions and exclusions)
	uary 1 of current year until the filed for bankruptcy:	Social Security	\$9,835.00		
For last c	alendar year:	Social Security	\$17,758.00		
(January	1 to December 31, <u>2023</u>)				
For the ca	alendar year before that:	Social Security	\$12,436.00		
(January	1 to December 31, <u>2022</u>)				
Part 3: Lis	st Certain Payments You	Made Before You Filed f	or Bankruptcy		
6. Are eithe	r Debtor 1's or Debtor 2's debts	s primarily consumer debts?			
☐ No.	Neither Debtor 1 nor Debtor 2 an individual primarily for a per			fined in 11 U.S.C. § 101(8)	as "incurred by
	During the 90 days before you	filed for bankruptcy, did you p	pay any creditor a total of \$7	7,575* or more?	
	☐ No. Go to line 7.				
	paid that creditor. Do	litor to whom you paid a total o not include payments for do s to an attorney for this bankı	mestic support obligations,		
	* Subject to adjustment on 4/0	· · · · · · · · · · · · · · · · · · ·		er the date of adjustment.	

	Case 2	24-13061	Doc 1	Filed 08/30 Docume		Entered 0 Page 38 of	8/30/24 14:39:08 46	Desc Main
Debtor 1	Alice	Kim		Cassel			Case number (ii	f known)
	First Name	Middle	e Name	Last Name				
√ Yes.				rily consumer del		y creditor a total o	f \$600 or more?	
	☐ No. Go to li	ine 7.						
	_		ditor to who	m you paid a total	of ¢en	10 or more and the	total amount you paid that	t creditor. Do not
	inclu		or domestic	support obligation			and alimony. Also, do not i	
				Dates of payment	Tota	l amount paid	Amount you still owe	Was this payment for
	Hyundai Cap	ital America		08/01/2024		\$1,260.00	\$7,981.33	Mortgage
	Creditor's Name			07/04/0004				√ Car
	Attn: Bankru	ptcy		07/01/2024				☐ Credit card
	Po Box 2082			06/01/2024				Loan repayment
	Number Street		•					☐ Suppliers or vendors
	Fountain Vly		829 IP Code					☐ Other
	City	State Z	ir Code					
8. Within 2 Include part 4: In	List all payments dentify Legal 1 year before you th matters, include	u filed for bank s guaranteed or s that benefited Actions, Rep	an insider.	y an insider. ns, and Forecic	osures ny lawa	suit, court action,	or administrative proceed	ebt that benefited an insider? ling? port or custody modifications, and
√ No								
_ □vos	Fill in the details							
☐ Yes.	Fill in the details	•						
Check all	a 1 year before y o that apply and fill Go to line 11. Fill in the informa	l in the details b		s any of your pro	perty r	epossessed, fored	closed, garnished, attach	ed, seized, or levied?
								
	90 days before make a payment				cludin	g a bank or financ	ial institution, set off any	amounts from your accounts or
√ 1 No	- -	-						
∟ Yes.	Fill in the details.							

	Case 24-130	61 Doc 1		Entered 08/30/2 Page 39 of 46	24 14:39:08	Desc Main
ebtor 1	Alice	Kim	Cassel		Case number (if ki	nown)
F	First Name	Middle Name	Last Name			
	r before you filed fo ver, a custodian, or			n the possession of an as	signee for the bene	fit of creditors, a court-
☑ No						
Yes						
Part 5: List C	ertain Gifts and	Contributions	5			
_	rs before you filed	for bankruptcy, o	did you give any gifts with	n a total value of more tha	n \$600 per person?	•
√ No						
Yes. Fill in	the details for each	gift.				
_	rs before you filed t	for bankruptcy, c	did you give any gifts or c	contributions with a total v	/alue of more than \$	\$600 to any charity?
√ No						
Yes. Fill in	the details for each	gift or contributio	on.			
Part 6: List C	ertain Losses					
List of	Citam E03303					
15. Within 1 yea gambling?	r before you filed fo	or bankruptcy or	since you filed for bankr	uptcy, did you lose anythi	ing because of theft	t, fire, other disaster, or
✓ No						
Yes. Fill in	the details.					
Part 7: List Co	ertain Payments	or Transfers				
about seeking b	ankruptcy or prepa	aring a bankrupto	cy petition?	ing on your behalf pay or		ty to anyone you consulted
□No						
Yes. Fill in	the details.					
Cibile I am	n.c	Descript	ion and value of any prop	erty transferred	Date payment or transfer was made	Amount of payment
Cibik Law, Person Who Wa		Attorney	y's Fee		transier was made	
1500 Walnu	ıt Street Suite 90	0			08/01/2024	\$2,575.00
Number Stre						
Philadelphi	a, PA 19102					
City	State ZIP C	ode				
mail@cibik Email or website						
Person Who Mo	de the Payment, if Not	You				
i orgon who ma	as and raymoni, ii NOI					

	Case 24-	13001 DOC 1	Document F	Page 40 of 46
ebtor 1	Alice	Kim	Cassel	Case number (if known)
	First Name	Middle Name	Last Name	
help you de Do not inclu	eal with your credit	iled for bankruptcy, did ors or to make paymer transfer that you listed	nts to your creditors?	ng on your behalf pay or transfer any property to anyone who promised to
ordinary co	urse of your busing outright transfers	less or financial affairs and transfers made as	?	rwise transfer any property to anyone, other than property transferred in the sting of a security interest or mortgage on your property).
√ No				
Yes. F	ill in the details.			
		u filed for bankruptcy, oprotection devices.)	did you transfer any prop	erty to a self-settled trust or similar device of which you are a beneficiary?
√ No				
☐ Yes. F	ill in the details.			
Part 8: Lis	st Certain Finan	icial Accounts, Inst	ruments, Safe Depos	sit Boxes, and Storage Units
		led for bankruptcy, we	re any financial accounts	or instruments held in your name, or for your benefit, closed, sold, moved,
	cking, savings, mor	ney market, or other fina		es of deposit; shares in banks, credit unions, brokerage houses, pension
√ No				
☐ Yes. F	ill in the details.			
21. Do you valuables?	now have, or did y	ou have within 1 year b	pefore you filed for bankr	uptcy, any safe deposit box or other depository for securities, cash, or other
√ No				
☐ Yes. F	ill in the details.			
22. Have yo	u stored property	in a storage unit or pla	ce other than your home	within 1 year before you filed for bankruptcy?
√ No			·	
☐ Yes. F	ill in the details.			
Part 9: Ide	entify Property	You Hold or Contro	I for Someone Else	
23. Do you	hold or control any	y property that someor	ne else owns? Include an	y property you borrowed from, are storing for, or hold in trust for someone.
√ No				
☐ Yes. F	ill in the details.			

Case 24-13061 Doc 1 Filed 08/30/24 Entered 08/30/24 14:39:08 Desc Main Document Page 41 of 46 Debtor 1 Alice Kim Cassel Case number (if known) _ First Name Last Name Middle Name Give Details About Environmental Information Part 10: For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **√**No Yes. Fill in the details. 25. Have you notified any governmental unit of any release of hazardous material? **√**No Yes. Fill in the details. 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **✓** No Yes. Fill in the details. Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation ☑ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. **✓** No ☐ Yes. Fill in the details below.

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De	ht∩r	1

Debtor 1	Alice	Kim	Cassel	Case number (if known)	
	First Name	Middle Name	Last Name		_

Part 12: Sign Below	
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments and correct. I understand that making a false statement, concealing property, or obbankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 ye	taining money or property by fraud in connection with a
/s/ Alice Kim Cassel Signature of Alice Kim Cassel, Debtor 1 Date 08/30/2024	
Did you attach additional pages to your <i>Statement of Financial Affairs for Individua</i> ✓ No ✓ Yes	ls Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an attorney to help you fill out ban ✓ No	nkruptcy forms? Attach the Bankruptcy Petition Preparer's Notice,
Yes. Name of person	Declaration, and Signature (Official Form 119).

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Fill in this information	n to identify your case	:		
Debtor 1	Alice	Kim	Cassel	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Easte	ern District of Pennsylvania	1
Case number (if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.
 Identify the creditor and the property that is collateral
 What do you intend to do with the property that secures Did you claim the property as a debt?

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mation below. Do n	ot list real	estate leases. Unexpi		acts and Unexpired Leases (Official Form 106G), fill in the n effect; the lease period has not yet ended. You may assum
	-	onal property leases	w//	Will the lease be assumed?
essor's name:	Hyund	dai Capital America		☐ No
escription of leased operty:	2024 F	Hyundai Kona		√ Yes
ssor's name:	Meliss	sa McNally		☐ No
				✓ Yes
escription of leased operty:	Reside	ential		
ssor's name:				☐ No
escription of leased operty:				☐ Yes
essor's name:				☐ No
escription of leased operty:				☐ Yes
essor's name:				☐ No
escription of leased operty:				☐ Yes
essor's name:				☐ No
escription of leased operty:				Yes
essor's name:				☐ No
escription of leased operty:				Yes
3: Sign Below				

Date 08/30/2024 MM/ DD/ YYYY

Signature of Debtor 1

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Pennsylvania

In re	Ca	assel, Alice Kim	
		Case No.	
Debte	or	Chapter7	
		DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR	
1.	comp	uant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named bensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to r be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as	ne, for services rendered
	For le	egal services, I have agreed to accept	\$2,575.00
	Prior	to the filing of this statement I have received	\$2,575.00
	Balan	nce Due	\$0.00
2.	The s	source of the compensation paid to me was:	
	√ D	Debtor	
3.	The s	source of compensation to be paid to me is:	
	√ D	Debtor	
4.	√ I law fir	have not agreed to share the above-disclosed compensation with any other person unless they are members.	pers and associates of my
		have agreed to share the above-disclosed compensation with a other person or persons who are not mer rm. A copy of the agreement, together with a list of the names of the people sharing in the compensation,	
5.	In retu	turn for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy cas	e, including:
		Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to fi bankruptcy;	le a petition in
	b.	Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;	
	c.	Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hear	rings thereof;
6.	By ag	greement with the debtor(s), the above-disclosed fee does not include the following services:	

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B2030 (Form 2030) (12/15)

Filing fee plus Costs & Expenses. Motion to Extend the Stay. Continued Meeting of Creditor Hearings, Addition of Creditor after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$375 per hour per attorney

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/30/2024 /s/ Michael A. Cibik

Date Michael A. Cibik
Signature of Attorney

Bar Number: 23110 Cibik Law, P.C. 1500 Walnut Street Suite 900 Philadelphia, PA 19102 Phone: (215) 735-1060

Cibik Law, P.C.

Name of law firm